

774

APPLICATION DATA SHEET

Application Information

Application Type:: Regular
 Subject Matter:: Utility
 Title:: INHALATION THERAPY DEVICE
 Attorney Docket Number:: P0777.70003US00
 Request for Early Publication?:: No
 Request for Non-Publication?:: No
 Total Drawing Sheets:: 5
 Small Entity?:: No
 Petition Included?:: No
 Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: Germany
 Status:: Full Capacity
 Applicant One Given Name:: Franz
 Family Name:: Feiner
 City of Residence:: Munich
 Country of Residence:: Germany
 Street of Mailing Address:: Ludwigshöherstr. 42
 City of Mailing Address:: Munich
 Country of Mailing Address:: Germany
 Postal or Zip Code of Mailing Address:: D-81479

APPLICATION DATA SHEET

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Applicant Two Given Name:: Markus
Family Name:: Borgschulte
City of Residence:: Munich
Country of Residence:: Germany
Street of Mailing Address:: Schönstrasse 116
City of Mailing Address:: Munich
Country of Mailing Address:: Germany
Postal or Zip Code of Mailing Address:: D-81543

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Applicant Three Given Name:: Wolfgang
Family Name:: Achtzehner
City of Residence:: Alling
Country of Residence:: Germany
Street of Mailing Address:: Rossfeldstrasse 41
City of Mailing Address:: Alling
Country of Mailing Address:: Germany
Postal or Zip Code of Mailing Address:: D-82239

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Applicant Four Given Name:: Eduard
Family Name:: Kunschir
City of Residence:: Munich
Country of Residence:: Germany
Street of Mailing Address:: Baaderstrasse 3
City of Mailing Address:: Munich

APPLICATION DATA SHEET

Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	D-80469
Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Applicant Five Given Name::	Joseph
Family Name::	Lass
City of Residence::	Munich
Country of Residence::	Germany
Street of Mailing Address::	Hiltenspergerstrasse 29
City of Mailing Address::	Munich
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	D-80798

Correspondence Information

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Representative Information

Representative Customer Number::

23628



Domestic Priority Information

APPLICATION DATA SHEET

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
WO	PCT/EP03/12076	10/30/03	Yes
DE	10250625.6	10/30/02	Yes

Assignee Information:

Assignee One Name::	Pari GmbH Spezialisten für effektive Inhalation
Street of Mailing Address::	Moosstrasse 3
City of Mailing Address::	Starnberg
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	D-82319